

EXHIBIT 5

TODD MYERS, M.D.
SCHNEEBERGER INGRAM v ETHICON INC.

July 09, 2013
 1-4

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1 IN THE UNITED STATES DISTRICT COURT
 2 FOR THE SOUTHERN DISTRICT OF WEST VIRGINIA
 3 CHARLESTON DIVISION
 4
 5 IN RE: ETHICON, INC., MDL. NO. 2327
 6 PELVIC REPAIR SYSTEMS
 7 PRODUCTS LIABILITY LITIGATION
 8
 9 LISA SCHNEEBERGER INGRAM, :
 10 Plaintiff, :
 11 v : CASE NO. 2:12-cv-9300
 12 ETHICON INC., et al., :
 13 Defendants. :
 14 * * *
 15 Videotaped Deposition of Todd Myers, M.D.
 16 Tuesday, July 9, 2013
 17 * * *
 18 a witness herein, taken on behalf of the plaintiff
 19 in the above-entitled cause of action pursuant to
 20 notice and the Federal Rules of Civil Procedure, by
 21 and before Lisa K. Hall, Certified Court Reporter
 22 and Notary Public within and for the State of West
 23 Virginia, at the offices of Marietta Gynecologic
 24 Association, 410 Second Street, Marietta, Ohio
 45750, commencing at 2:57 p.m.

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 20 and
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| | |
|---|---|
| <p style="text-align: right;">Page 85</p> <p>1 expressed to you directly about that advertising?</p> <p>2 MR. BOWMAN: Objection to form.</p> <p>3 A. Most patients don't know specifics. They</p> <p>4 just think that there is something wrong with the</p> <p>5 mesh because it's on TV, and -- you know, and then</p> <p>6 there's -- there's ads on TV from attorneys'</p> <p>7 offices, and so they come in worried about mesh, or</p> <p>8 not wanting mesh, but they don't know why, because</p> <p>9 the TV commercial doesn't specify.</p> <p>10 I guess maybe it -- it does give problems,</p> <p>11 but -- but what the -- I think what my patients</p> <p>12 come to me with is just, Well, don't put mesh in</p> <p>13 me, I heard it's bad. That's basically what I</p> <p>14 get.</p> <p>15 And then I -- I step through the --</p> <p>16 I mean, in a way, it's been good for me. It makes</p> <p>17 me step through all the possible complications very</p> <p>18 thoroughly with the patient because -- to try to</p> <p>19 allay their fears.</p> <p>20 Q. Have you or your practice partners ever</p> <p>21 implanted mesh with pelvic organ prolapse?</p> <p>22 A. Yes.</p> <p>23 Q. Are you still using mesh for any sort of</p> <p>24 anterior or posterior repairs?</p> | <p style="text-align: right;">Page 87</p> <p>1 he first got here.</p> <p>2 Q. Who is "Jeff"?</p> <p>3 THE WITNESS: Kuntz, is that his</p> <p>4 name?</p> <p>5 MR. BOWMAN: (Nodding head.)</p> <p>6 BY MS. METZGER:</p> <p>7 Q. One of -- That -- That's another one of</p> <p>8 Mrs. Ingram's attorneys?</p> <p>9 A. I assume so.</p> <p>10 Q. What was your conversation with Jeff</p> <p>11 about?</p> <p>12 A. He just asked me some general questions,</p> <p>13 and he basically just wanted to say that they</p> <p>14 wanted to make sure that the mesh was made --</p> <p>15 was -- people knew all the contraindications and</p> <p>16 possible bad effects from the mesh in the future,</p> <p>17 and it be made safe for patients, is the gist of</p> <p>18 the conversa -- He just wanted to know why they</p> <p>19 were taking this to court.</p> <p>20 Q. So -- So Jeff wanted to -- can you tell me</p> <p>21 specifically what Jeff asked you?</p> <p>22 A. He kind of asked me if I still did the</p> <p>23 TVT-O procedure, and -- I'm trying to think</p> <p>24 specifically what he asked.</p> |
| <p style="text-align: right;">Page 86</p> <p>1 A. No.</p> <p>2 Q. Do patients of yours with -- with</p> <p>3 mid-urethral slings express concerns to you related</p> <p>4 to the advertising that they have seen on</p> <p>5 television?</p> <p>6 MR. BOWMAN: Objection to form.</p> <p>7 A. No. No. The vast majority of people are</p> <p>8 happy with the procedure, and so I don't think the</p> <p>9 warnings bother them knowing that their procedure</p> <p>10 was successful.</p> <p>11 Q. Doctor, if Mrs. Ingram -- have you had the</p> <p>12 opportunity to review Mrs. Ingram's deposition</p> <p>13 transcript?</p> <p>14 A. No.</p> <p>15 Q. Has anyone spoken to you about</p> <p>16 Mrs. Ingram's deposition?</p> <p>17 A. No.</p> <p>18 Q. Have you had the opportunity to speak to</p> <p>19 Mrs. Ingram's attorneys before this deposition?</p> <p>20 A. Briefly, yes.</p> <p>21 Q. When was that discussion?</p> <p>22 A. I talked to Jeff on the phone, you know,</p> <p>23 within the last two weeks.</p> <p>24 And then I just spoke to Mike briefly when</p> | <p style="text-align: right;">Page 88</p> <p>1 And -- And then he wanted to know -- he</p> <p>2 asked me what I told patients as far as what the</p> <p>3 complications were, and -- and I told him, you</p> <p>4 know, what I usually tell patients. And he asked</p> <p>5 me if I knew of some other complications, and, you</p> <p>6 know, I said no. That was pretty much the gist of</p> <p>7 the conversation.</p> <p>8 Q. Did Jeff make any recommendations to you</p> <p>9 about how you should handle the consenting process</p> <p>10 in the future?</p> <p>11 MR. BOWMAN: Objection to form.</p> <p>12 A. No. He just said his goal was to make the</p> <p>13 consenting process better for the patient in the</p> <p>14 future.</p> <p>15 Q. How long did that conversation with Jeff</p> <p>16 last?</p> <p>17 A. Probably 10 or 15 minutes.</p> <p>18 Q. When he said make the consenting process</p> <p>19 safer in the future, did he offer an opinion to</p> <p>20 you, or did he say anything to you, about his</p> <p>21 feelings one way or another about your consenting</p> <p>22 process for Mrs. Ingram?</p> <p>23 A. No.</p> <p>24 Q. Did he imply to you or state to you in any</p> |